Image# 11971560808 PAGE 1 / 4

FEC FORM 1		STATE ORGA							Of	fice Use	Only			
NAME OF COMMITTEE (in	n full)	(Check if n		Example over the	le:If typin e lines.	g, type	12	FE4M	5					
COMMER	CIAL F	REAL EST	ATE F	FINA	NCE	CO	UNC	IL P	AC	<u>,</u>	1 1	1 1		, I
ADDRESS (number a	nd street)	30 BROAD STREE	T											
(Check if a		28TH FLOOR												
is changed)		NEW YORK CITY							100	04		- 🗀		
			CI	TY			STA	ГЕ		ZII	P CC	DE		
COMMITTEE'S E-MA	IL ADDRES		nly one e-m	nail addre	ss)									
X (Check if		mflood@crefc.org												
is change	d)													
COMMITTEE'S WEB	PAGE ADD	RESS (URL)												
(Check if	address													
is change														
2. DATE 10	M / D I	2011]											
3. FEC IDENTIFIC	CATION NU	MBER	C coo	411173										
4. IS THIS STATE	MENT X	NEW (N)	OR		AMENI	DED (A)								
I certify that I have e	examined this	Statement and to	the best o	f my kno	wledge a	nd belie	ef it is true	e, corre	ct and	comple	ete.			
Type or Print Name	of Treasurer	Mike Flood												
Signature of Treasure	<i>Mike Flo</i> er	od		[E	lectronica	lly Filed]	I Date	M 1	0 /	11	1	Y	y y 2011	Y
NOTE: Submission of		ous, or incomplete info				_	_			penaltie	s of 2	2 U.S.	C. §4	137g.

	Office Use Only		For further information contact: Federal Election Commission Toll Free 800-424-9530	FEC FORM 1 (Revised 02/2009)
	Offig		Local 202-694-1100	

	EEC Ea	rm 1 (Pavisad 02/2000)	Page 2
		rm 1 (Revised 02/2009) COMMITTEE	raye Z
		e Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Com information below.)	plete the candidate
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)			(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

Title or Position CEO

	_		_
	FEC Form 1 (Revised	d 02/2009)	Page 3
V	Vrite or Type Committee Nar	ne	
(COMMERCIAI	REAL ESTATE FINANCE COUNCIL PAG	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	rship PAC Sponsor
C	OMMERCIAL REAL	L ESTATE FINANCE COUNCIL	
	Mailing Address	30 Broad Street	
		28th Floor	
		New York NY 10004	
		CITY STATE	ZIP CODE
	Custodian of Records: Id books and records. Mike Flo Full Name	entify by name, address (phone number optional) and position of the person in p	ossession of committee
	Mailing Address	900 7th Street, NW Suite 820	
		Washington DC 20001	
	Title or Position	CITY STATE	ZIP CODE
	VP		448
3.	Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; and the rassistant treasurer).	name and address of
	Full Name Stephen of Treasurer	Renna	
	Mailing Address	900 7th Street, Suite 820	
		Washington 1 DC 1 120001	

CITY

ZIP CODE

0850

448

STATE

Telephone number

202

I		
FEC For	m 1 (Revised 02/2009)	Page 4
Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	-
Banks or Other safety deposit b Name of Bank,	Depository, etc.	
safety deposit b		
safety deposit b	Depository, etc. Chase P.O. Box 5206	
safety deposit b Name of Bank,	Depository, etc. Chase P.O. Box 5206	
safety deposit b Name of Bank,	Depository, etc. Chase P.O. Box 5206	1042
safety deposit b Name of Bank,	Depository, etc. Chase P.O. Box 5206	1042 ZIP CODE
safety deposit b Name of Bank,	Depository, etc. Chase P.O. Box 5206 New Hyde Park CITY STATE	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Chase P.O. Box 5206 New Hyde Park CITY STATE	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Chase P.O. Box 5206 New Hyde Park CITY STATE	ZIP CODE
safety deposit b Name of Bank, Mailing Address	Depository, etc. Chase P.O. Box 5206 New Hyde Park CITY STATE Depository, etc.	ZIP CODE
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Chase P.O. Box 5206 New Hyde Park CITY STATE Depository, etc.	ZIP CODE
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Chase P.O. Box 5206 New Hyde Park CITY STATE Depository, etc.	ZIP CODE